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(Requestor's Name)		
(Address)		
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PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
		
Special Instructions to Filing Officer:		
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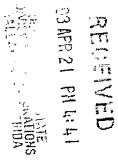
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CT CORPORATION

CORPORATION(S) NAME	-	
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JJM Investments, LLC	<u> </u>	<u> </u>
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() Profit	() Amendment	() Merger
() Nonprofit	CART A STREET	
(X) Foreign	() Dissolution/Withdraw	val () Mark
() Limited Partnership	() Reinstatement () Annual Report	() Other
(X) LLC	() Name Registration	
(A) EDC	() Fictitious Name	() UCC
() Certified Copy	() Photocopies	() CUS
() Call When Ready	() Call If Problem	() After 4:30
(x) Walk In	() Will Wait	(x) Pick Up
() Mail Out		
Name	4/21/03 _	Order#: 5834737 SO
Availability	-	·
Document		- =
Examiner	AAM	Ref#:
Updater		
Verifier		
W.P. Verifier	- -	Amount: \$

660 East Jefferson Street Tallahassee, FL 32301 Tel. 850 222 1092 Fax 850 222 76\(\)5

A CCH LEGAL INFORMATION SERVICES COMPANY

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	•	
The name of the Limited Liability Company is:	=	
JJM Investments, LLC		
ARTICLE II - Address: The mailing address and street address of the print	ncipal office of the Limited Liability Company is:	
c/o John Melk, One Fisher Island Drive,	Fisher Island, FL 33109	
ARTICLE III - Registered Agent, Registered	Office, & Registered Agent's Signature:	
The name and the Florida street address of the rep	gistered agent are:	
CT Corpora	tion System	
Name		
	MPR 2	
	ne_Island Road (P.O. Box NOT acceptable)	
Piorida Sueet address	T. C. Box Mor acceptable)	
Plantation	FL 33324	
City, St	ate, and Zip	
liability company at the place designated in this cregistered agent and agree to act in this capacity. statutes relating to the proper and complete performance the obligations of my position as registered CT Corporation System By: Registered A	I further agree to comply with the provisions of all ormance of my duties, and I am familiar with and d agent as provided for in Chapter 608, F.S.	
(An additional article must be a	dded if an effective date is requested)	
m sanks		
Signature of a member or an au	thorized representative of a member.	
(In accordance with section 608, of this document constitutes and that the facts stated herein are tr	408(3), Florida Statutes, the execution affirmation under the penalties of perjury ue.)	
Michelle Jac Typed or prin	nted name of signee	
Filing F \$100.00 Filing Fee for A	rticles of Organization	

\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)